STATEMENT OF

FORM 1	OF	(See instruction			Office use only
1. NAME OF COMMITTEE (in		Check if name changed)	Example: If typying, type over the lines	12FE4M5	
CenturyLink I	nc. Employees Poli	tical Action Co	mmittee		
ADDRESS (number and	street) 150 Fa	yetteville Stree	et 		
(Check if addres	Suite 2	2810			
is changed)	Raleig	h 		NC L	27601
			CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MA	IL ADDRESS (Please p	rovide only one e-r	nail address)		
(Check if addressis changed)	s pam.2	melton@centu	ırylink.com		
is changed)		1111			
COMMITTEE'S WEB	PAGE ADDRESS (URI	_)			
(Check if addres	s	1111		11111	
is changed)		1 1 1 1 1		1 1 1 1 1 1 1	
2. DATE M 4	M / D D / Y D 1	2 0 1 1 °			
3. FEC IDENTIFICA	ATION NUMBER		C C00419911		
4. IS THIS STATEM	MENT NEW (N) OR	X AMENDED (A	A)	
I certify that I have exam	ined this Statement and to	the best of my know	vledge and belief it is true, corr	rect and complete	_
Type or Print Name of	Treasurer La	rry Mathiot			
Type of Time Name of		•			
Signature of Treasure	Electronically Filed I	by Larry Math	iot	Date 0 4	0 1
NOTE: Submission of fa	·	•	subject the person signing thi	•	
Office Use Only			For further informa Federal Election Co Toll Free 800-424-9 Local 202-694-1100	mmission 530	FEC FORM 1 (Revised 02/2009)